



The Massachusetts HIV Drug Assistance Program (HDAP) and Comprehensive Health Insurance Initiative (CHII)

Grievance Procedure

If you have a concern or grievance (complaint) with HDAP, you can tell the HDAP staff member you have dealt with. You need to report this complaint within ten business days of its happening. You can make your complaint either in person, by writing a letter, or by telephone:

Address: Community Resource Initiative
HDAP Staff Contact
The Schrafft's City Center, 529 Main Street, Suite 301
Boston, MA 02129

Telephone: 1-800-228-2714 **Fax:** (617) 502-1703

A staff member will get back to you within ten business days.

If you are not happy with the answer you receive, you may ask for a meeting with that **staff member's supervisor**. You can do this in a letter or by phone. This has to be done within ten business days after you get a response. The supervisor will get back to you within ten business days.

If you are still not happy with the answers you have received, you may then take the complaint to the **HDAP Program Director**. This must be in writing. It can be mailed, e-mailed, faxed or hand delivered, and must be done within ten business days after you get an answer from the supervisor. You can request a face-to-face meeting, write a letter, or telephone your complaint. The HDAP Program Director will issue a written decision within ten business days of the receipt of the concern/grievance. At any stage in this procedure, you may be accompanied or represented by anyone you feel is an appropriate advocate, including:

- a case manager
- an attorney
- a paralegal
- a translator
- a friend
- a relative

You must provide written authorization (permission) for HDAP staff to share information with this person, if s/he is not a contact listed in the HDAP/CHII application. Written permission is also needed to share information if you are not to be part of the conversation or interaction.

For more information contact:

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HDAP Program Director
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